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Percutaneous intervention in isolated left main ostial stenosis

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Introduction: Isolated left main coronary stenosis (LMCA) is a rare entity and occurs in 0.7 to 1% patients of coronary artery disease (CAD).

Patients & Methods: Two women with mean age of 31.6 years presented with PR severe exertional angina and dyspnea short duration of (3 ± 1.5 months) while another woman presented with anterior wall myocardial infarction (AWMI). The two women had stress test positive in stage 1 with ST depression in several leads. The echo was normal in these two patients and depressed (LVEF-30%) in one patient with acute MI (30%). All three were non-smokers and did not have any diabetes or elevated cholesterol levels. The inflammatory markers (ESR, CRP) as well as ANA and DNA were negative in these patients.

Coronary angiography in the two women revealed left main coronary artery ostial stenosis. There was additional mild ostial stenosis of the right coronary artery in one patient. The two patients underwent PCI to the left main ostium with short 4mm drug eluting stents. The third patient with AWMI had ostial left main disease with severe thrombotic plaque burden and underwent primary angioplasty after thrombectomy with a drug eluting stent (3.5x12mm) and further dilatation with a non-compliant 4mm balloon. IVUS revealed optimal stent apposition.

Conclusion: We present 3 premenopausal South Asian women with isolated left main stenosis, without the traditional risk factors of CAD and evidence of other non-atherosclerotic causes of left main stenosis. This rare entity has been reported previously, mainly in young oriental and western women, and histopathological findings in surgical series have revealed early ostialatheromatous involvement, in the absence of atherosclerotic changes in rest of the coronary tree.

Biography

Bhanu Duggal is an Associate Professor of Cardiology, at Grant Medical College and Sir JJ Group of Hospitals, India. She has many publications in National and International Journals. And also done a fellowship in structural heart disease at Royal Brompton Hospital, UK and training in Intravascular Ultrasound at Cleveland Clinic, USA

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